



Friday, August 3<sup>rd</sup> – Saturday, August 4<sup>th</sup> 2018

*“Youth All In”*  
Registration Packet  
For

Camp Long Recreation Facility

82 Camp Long Road

Aiken, South Carolina 29805

803-502-1683



Dear Gethsemane Churches:

The Youth Auxiliary of the Gethsemane Baptist Association is sponsoring an exciting camping trip for its annual "Youth All In" event for Friday, August 3, 2018, through Saturday, August 4, 2018, at Camp Long Recreation Facility in Aiken, South Carolina. Camp Long is operated by the Youth Learning Institute as part of Clemson University.

This year, we will focus on youths in grades 5<sup>th</sup> – 12<sup>th</sup> grade. The event will begin with a late dinner and an evening activity on Friday at 7:30 p.m., and will culminate on Saturday afternoon with breakfast, morning workshops and a cook-out with a team effort activity (please refer to tentative itinerary). The amount will cover all three camp meals which again is Friday night dinner, Saturday morning breakfast and Saturday lunch (cook-out). The cost also includes a T-shirt for each participant.

**The cost will be \$40 per person. In an effort to plan accordingly, registration forms for each participant along the funds must be sent in by June 12, 2018.**

The following forms are enclosed and must be completed on each participant and return to your Youth Supervisor at our monthly meeting or to the "Youth All In" Committee and mailed to Post Office Box 1932, Columbia, SC 29203 with check by. **(These signed forms must be completed on every youth in order to participate.)** We also suggest that each church youth supervisor/chaperone keep a copy at the Camp in the event of a medical emergency. The following forms must be completed and returned:

1. Youth Auxiliary Gethsemane Registration Form/Permission Slip
2. Health Form
3. Youth Auxiliary Gethsemane Waiver of Liability Form
4. Tentative Itinerary
5. The Camp's general information and policies for youth supervisors (as well as parents and chaperones) review.

As you are aware, the Gethsemane Youth Auxiliary requires all churches participating in overnight events provide adult supervision for their youth. It is suggested that at least one youth supervisor/chaperone for every group of five. There will be several youth groups attending and it is our primary goal to ensure everyone's safety.



Please note that each participant must bring something to cover mattress (blanket) or a sleeping bag; change of clothing and toiletries (which includes soap), and wash cloth and towel.

We are excited and we hope that you are too! REMEMBER it is a one night camping trip with cabins and all!! We pray that your church will consider joining wonderful outing. To ensure that all youth and chaperones enjoy this event to its fullest extent, there will be a limit of 190 youth with a **final payment and packet registration deadline of June 12, 2018**. Youth Supervisors are responsible for ensuring that all registration forms are received by the "Youth All In" Committee.

Please feel free to contact me directly if you have any questions, or need any additional information. We hope to see you there!

Blessings to each of you,

Rev. Abraham L. Salley, President  
Gethsemane Youth Auxiliary  
Phone: (803) 422-2996  
Email: [abraham.salley@yahoo.com](mailto:abraham.salley@yahoo.com)



\*\*\*\*\***Registration Form**\*\*\*\*\*

*Mandatory form for every youth participant*

**“YOUTH All In”**

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Name of Church _____
Youth Supervisor Name _____
Chaperone for Event (if different person) _____
Contact Number for Chaperone or Youth Supervisor _____

**Youth Name** \_\_\_\_\_

**Youth Address** \_\_\_\_\_

**Contact Number** \_\_\_\_\_ **Email address** \_\_\_\_\_

**Age** \_\_\_\_\_ **Sex:** Female \_\_\_\_\_ Male \_\_\_\_\_

**Emergency Contact Information:**

\_\_\_\_\_

\_\_\_\_\_

**Amount Paid (\$40)** Yes \_\_\_\_\_ No \_\_\_\_\_

**T-Shirt Size:** Child Large \_\_\_\_\_ Adult Small \_\_\_\_\_ Adult Medium \_\_\_\_\_

**Adult Large** \_\_\_\_\_ **Adult Extra-Large** \_\_\_\_\_ **1X** \_\_\_\_\_ **2X** \_\_\_\_\_ **3X** \_\_\_\_\_

**Parent/Guardian Signature** \_\_\_\_\_

(Permission to Attend)



(Permission to Attend)

## **Wavier of Liability**

**(READ CAREFULLY BEFORE SIGNING)**

In consideration of acceptance of letter of waiver of liability, I, for myself and/or dependent/s fully and forever waive and release any and all rights and claims for any injuries and damages, including but not limited to demands or actions for negligence, premises liability, emotional injury, intentional conduct, resulting in unintended injury or damage tort claims, any other actions or demands of whatsoever nature, to the fullest extent permitted by law, I may have against The Gethsemane Youth Auxiliary, Gethsemane Missionary Baptist Association, pastors, officers, employees, members, or any representative acting for or on behalf of the Association.

I acknowledge that I am aware of the inherent risks involved in attending these events, and I voluntarily assume these risks and liabilities.

Name of Event or Function: **"All Youth In" - Camp Long Recreational Facility**

Date for the Event or Function: **Friday-Saturday, August 3<sup>rd</sup> -4<sup>th</sup>, 2018**

Person/s attending event or function:

*As a condition of my participation in this Event or Function, I hereby grant the Association a limited license to use my name, likeness, image, voice, video, athletic performance, biographical and other information (collectively, "Likeness"), in any format whatsoever, and to distribute, broadcast and exhibit these without charge, restriction or liability, but only for the purposes of advertising or promoting the Event or Function. The foregoing grant, however, does not constitute consent to use my Likeness in an endorsement of any product or services without my specific written consent.*

**EMERGENCY CONTACT: NAME AND TELEPHONE NUMBER:**

\_\_\_\_\_

**I am at least 18-years of age and have read and understood the above:**

Youth Signature \_\_\_\_\_ Date \_\_\_\_\_

**I am under 18-years of age.** My parent or legal guardian has read and understood the above and is signing below. He/She consents to my participation in the event under the terms hereof.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_



## Gethsemane Youth Auxiliary Health Form

*Form must be completed in its entirety and signed by a parent/guardian in order for youth to attend and participate in Gethsemane Youth Auxiliary led events*

Youth Name:		
Date of Birth:	Sex: M _____ F _____	
Parent/Guardian Name:	Home Phone:	Cell Phone:
<b>Emergency Contact Information:</b>		
1st Contact Person Name:	Relationship:	Phone:
2nd Contact Person Name:	Relationship:	Phone:
Allergies (Please list): _____		
<b>*Note: Please bring all medication in original bottle/packaging</b>		
List current medication(s) and dosages:		
Any condition requiring special attention:		
Doctor's Name:		Phone Number:
Health Insurance Company: _____		
Policy #: _____		



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***Tentative ITINERARY***  
***August 3 - 4<sup>th</sup>, 2018***

**Friday, August 3, 2018**

Arrival time between 4 - 6:30 p.m.

Dinner/Group Activity

7:30 p.m. - 11:00 p.m.

**Saturday, August 4, 2018**

Breakfast

7:00 a.m. - 9:00 a.m.

(During this time please pack things and please make sure  
that the sleeping quarters are clean - we are responsible)

Workshops (*Breakout by grade level - Facilitators to switch not youth*)

“My Body is God’s Temple”  
(Our Body, Our Mind and Our Spirit-  
Personal hygiene and health)

9:15 a.m. - 10:00 a.m.

“The Good, the Bad and the Ugly” of  
Social Media (stigma/bullying/sex trafficking)

10:15 a.m. - 11:00 a.m.

Youth Activity

11:15 a.m. - 12:00 noon

Youth Supervisor Training/Workshop

11:15 a.m. - 12:00 noon

Lunch - Cookout

12:15 p.m. -

Wrap up